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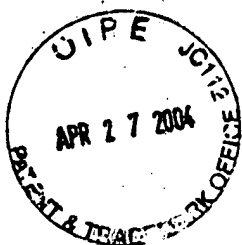
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Combined Declaration and Power of Attorney form for  
Patent Application Claiming Foreign Application Priority (3/2002)

<b>COMBINED DECLARATION &amp; POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	Attorney Docket Number	87092291.242025	
	First Named Inventor	Yeh	
	<b>COMPLETE IF KNOWN</b>		
	Application Number	10/757,073	
	Filing Date	01/14/2004	
	Art Unit	Unassigned	
<input type="checkbox"/> Declaration Submitted with Initial Filing	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	Unassigned

As the below named inventor, I hereby declare that:  
My residence, mailing address, and citizenship are as stated below next to my name.  
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Nonvolatile Semiconductor Memory and Operating Method of the Memory

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

01/14/2004

as United States Application Number or PCT International

Application Number 10/757,073

as amended by the amendment dated

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

#### POWER OF ATTORNEY

I hereby appoint Practitioners at Customer Number 23562, BAKER & MCKENZIE, as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. I also hereby authorize said practitioners to insert the filing date and/or application number, above, when known.

#### FOREIGN APPLICATION PRIORITY CLAIM

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

<b>DECLARATION &amp; POWER OF ATTORNEY - Utility or Design Patent Application</b>			
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">2 3 5 6 2</div> OR <input type="checkbox"/> Correspondence address below	
Name <b>Brian C. McCormack</b>			
Address			
City		State	
Country		ZIP	
Telephone 214/978-3000		Fax 214/978-3099	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Chih-Chieh</b>		Family Name or Surname <b>Yeh</b>	
Inventor's Signature <i>Chih Chieh Yeh</i>		Date <i>2004.3.5</i>	
Taipei Residence: City		Taiwan, R.O.C. Country	
State		Citizenship	
1F, No. 122. Dazhi Street Mailing Address			
City Taipei		ZIP	
State		Country Taiwan, R.O.C.	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Wen-Jer</b>		Family Name or Surname <b>Tsal</b>	
Inventor's Signature <i>Wen-Jer Tsai</i>		Date <i>2004.3.5</i>	
Hualien Residence: City		Taiwan, R.O.C. Country	
State		Citizenship	
No. 11, Lane 36, Rongzheng Street Mailing Address			
Hualien City		ZIP	
State		Country Taiwan, R.O.C.	
<input checked="" type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <b>Tao-Cheng</b>		Family Name or Surname <b>Lu</b>	
Inventor's Signature <i>Tao Cheng Lu</i>		Date <i>3/8/04</i>	
Kaohsiung Residence: City	State	Taiwan Country	Taiwan, R.O.C. Citizenship
No. 36, Lane 1, Nenjiang Street Mailing Address			
Mailing Address			
City <b>Kaohsiung</b>	State	ZIP	Taiwan, R.O.C. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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